

APPLICATION FOR SERVICES

I. OWNER/PROPE	RTY DESCRIPTION					
Home Owner Name(s):				Zip:		
Property Address: Neighborhood:						
Home Phone:	Cell Phone: Work Phone:			Work Phone:		
Email Address:	Person to contact:					
	Annual household incom	\$80,001-12		\$15,001-45,000 Over \$120,000	\$45,001-80,000	
Age: Under 3	5 35-65	Over 65				
How long have you lived in Norfolk? How long have you owned this property?						
Do you currently reside in this Yes No property?						
Mailing address, if other than the property to be renovated:						
How did you hear about the Neighborhood Design and Resource Center?						
II. DEVELOPMENT AND RENOVATION PLANS						
Please give a description of the proposed improvements or new construction project that you are considering:						
What is your timefram	e to begin work?	3-6 mos	6-12 mos	12 mos and be	yond	
Do you have a survey of your property? Yes No Required for all addition, please attach a copy						
Do you have photos of your exterior Yes No elevation? Please attach copy, required						
III. FINANCING PLAN						
What is your budget for this project? Do you have the cash available or will you finance?						
If financing, have you been pre-approved by a lender? Yes No Have you received estimates form contractors?						

APPLICATION FOR SERVICES

If yes, what was the estimate?	
recommendations, assessments, estimates, calculations, plans, de	sign and Resource center (NDRC), including but not limited to consultations, advice, lesigns, drawings and all other materials and information, are provided for guidance free without a contractual or other obligation on behalf of the City or you. Accordingly, shalf of you or the City of Norfolk.
Signature (Property Owner)	Date
Signature (Property Owner)	Date
ADMINISTRATIVE USE ONLY	
Initial Contact Date:	Initial Interview Date: